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FEC FORM 2

STATEMENT OF CANDIDACY

=							=	
1.	(a) Name of Candidate (in full)							
	Levin, Sander, M, Mr,	□ Oh a -1-	if addrass -	hongod		2 Candidata's EEC Identification Number		
	(b) Address (number and street) PO Box 37	□ Cneck	if address cl	nanged		Candidate's FEC Identification Number H2MI17023		
	(c) City, State, and ZIP Code					3. Is This New Amende	d	
	Roseville		MI	48066		Statement (N) OR (A)		
4.	Party Affiliation	5. Office Sought				rict of Candidate		
	DEMOCRATIC PARTY	House			MI	09		
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE								
7.	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 (year of election)							
	NOTE: This designation should be filed with the appropriate office listed in the instructions.							
	(a) Name of Committee (in full)							
	Levin for Congress							
	(b) Address (number and street) Post Office Box 37							
	(c) City, State, and ZIP Code						—	
	Roseville				MI	48066		
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)								
8.	I hereby authorize the following name candidacy.	ned committee, whic	h is NOT my	, principa	ıl campaign con	nmittee, to receive and expend funds on behalf of my		
NOTE: This designation should be filed with the principal campaign committee.								
	(a) Name of Committee (in full)						_	
	(b) Address (number and street)							
	(c) City, State, and ZIP Code							
	(c) City, State, and ZIP Code							
		mined this Stateme	nt and to the	best of n	ny knowledge a	nd belief it is true, correct and complete.	_	
Sic	I certify that I have exa	mined this Stateme	nt and to the	best of n	ny knowledge a	nd belief it is true, correct and complete.		
	I certify that I have exa	mined this Stateme	nt and to the	best of n	ny knowledge a	Date	_	
	I certify that I have exa	mined this Stateme	nt and to the		ny knowledge a ronically Filed]		<u> </u>	
Le	I certify that I have exa gnature of Candidate evin, Sander, M, ,			[Electi	ronically Filed]	Date		
Le	I certify that I have exa gnature of Candidate evin, Sander, M, ,			[Electi	ronically Filed]	Date 12/20/2016		
Le	I certify that I have exa gnature of Candidate evin, Sander, M, ,			[Electi	ronically Filed]	Date 12/20/2016	-	

FEC FORM 2 (REV. 02/2009)